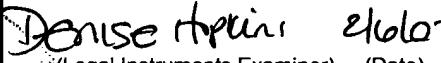


Issue Classification				Application/Control No.		Applicant(s)/Patent under Reexamination		
				09/695,715		AHMADREZA ROFOUGARAN ET AL		
Examiner				Art Unit				
Marceau Milord				2618				

ORIGINAL				CROSS REFERENCE(S)						
CLASS	SUBCLASS	CLASS		SUBCLASS (ONE SUBCLASS PER BLOCK)						
455	20	455		118	85	86	180.3	78	323	190.1
INTERNATIONAL CLASSIFICATION				327	237	117				
H	0	4	B	7/14	323	283	267			
				/	331	37	39			
				/						
				/						
				/						
				 MARCEAU MILORD PRIMARY EXAMINER (Primary Examiner) <i>2-4-07</i> (Date)					Total Claims Allowed: 134	
 Denise Hopkins 2/6/07 (Legal Instruments Examiner) (Date)									O.G. Print Claim(s) 199	O.G. Print Fig. 30c

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
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2		32		62	92	122	
3		33		63	93	123	
4		34		64	94	124	
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6		36		66	96	126	
7		37		67	97	127	
8		38		68	98	128	
9		39		69	99	129	
10		40		70	100	130	
11		41		71	101	131	
12		42		72	102	132	
13		43		73	103	133	
14		44		74	104	134	
15		45		75	105	135	
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19		49		79	109	139	
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21		51		81	111	141	
22		52		82	112	142	
23		53		83	113	143	
24		54		84	114	144	
25		55		85	115	145	
26		56		86	116	146	
27		57		87	117	147	
28		58		88	118	148	
29		59		89	119	149	
30		60		90	120	150	

Issue Classification 	Application/Control No.	Applicant(s)/Patent under Reexamination
	09/695,715	AHMADREZA ROFOUGARAN ET AL
	Examiner Marceau Milord	Art Unit 2618

ISSUE CLASSIFICATION													
ORIGINAL		CROSS REFERENCE(S)											
CLASS	SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)										
INTERNATIONAL CLASSIFICATION			/										
			/										
			/										
			/										
			/										
(Assistant Examiner) (Date)			 MARCEAU MILORD PRIMARY EXAMINER <small>(Primary Examiner)</small>						Total Claims Allowed:				
(Legal Instruments Examiner) (Date)									O.G. Print Claim(s)	O.G. Print Fig.			
<i>2-4-07</i> <small>(Date)</small>													

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original
80	211	32	241	92	271	301	331
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82	213	34	243	94	273	303	333
83	214	35	244	95	274	304	334
84	215	36	245	96	275	305	335
85	216	37	246	97	276	306	336
86	217	38	247	100	277	307	337
87	218	46	248	98	278	308	338
88	219	47	249	99	279	309	339
89	220	48	250	118	280	310	340
90	221	49	251	119	281	311	341
101	222	50	252	120	282	312	342
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103	224	52	254	122	284	314	344
104	225	55	255	123	285	315	345
105	226	53	256	124	286	316	346
106	227	54	257	125	287	317	347
107	228	56	258	126	288	318	348
108	229	57	259	127	289	319	349
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112	232	72	262	130	292	322	352
113	233	73	263	131	293	323	353
114	234	74	264	132	294	324	354
115	235	75	265	133	295	325	355
116	236	76	266	134	296	326	356
117	237	77	267	111	297	327	357
29	238	78	268		298	328	358
30	239	79	269		299	329	359
31	240	91	270		300	330	360